

Application Data Sheet

Application Information

Application number::
Filing Date::
Application Type:: Regular
Subject Matter:: Utility
Title:: INTERACTIVE HAND HELD APPARATUS WITH STYLUS
Attorney Docket Number:: 020824-004112US
Request for Early Publication:: No
Request for Non-Publication:: Yes
Suggested Drawing Figure::
Total Drawing Sheets:: 15
Small Entity?:: No
Petition included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Michael
Middle Name:: C.
Family Name:: Wood
City of Residence:: Orinda
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 27 La Noria
City of Mailing Address:: Orinda

State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94563

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Alice
Middle Name::
Family Name:: Chen
City of Residence:: Oakland
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 3535 Lincoln Avenue
City of Mailing Address:: Oakland
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94602

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: David
Middle Name::
Family Name:: Goldstein
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 3250 Webster Street, #1
City of Mailing Address:: San Francisco
State or Province of mailing address:: CA

Country of mailing address:: US
Postal or Zip Code of mailing address:: 94123

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Mark
Middle Name::
Family Name:: Flowers
City of Residence:: Los Gatos
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 119 Los Patios
City of Mailing Address:: Los Gatos
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 95032

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Joseph
Middle Name:: B.
Family Name:: Miller
Name Suffix:: III
City of Residence:: San Ramon
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1501 Old Ranch Estates Drive
City of Mailing Address:: San Ramon
State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94583

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Michelle

Middle Name::

Family Name:: Fitts

City of Residence:: Hayward

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 3683 Skyline Drive

City of Mailing Address:: Hayward

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94542

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Curtis

Middle Name::

Family Name:: Cole

City of Residence:: Los Altos

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 460 Van Buren Avenue

City of Mailing Address:: Los Altos

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94022

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Rick
Middle Name::
Family Name:: Adolf
City of Residence:: Sunnyvale
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1385 Fisherhawk Drive
City of Mailing Address:: Sunnyvale
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94087

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Antonia
Middle Name::
Family Name:: Kohl
City of Residence:: Oakland
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1184 Ocean Avenue
City of Mailing Address:: Oakland
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94608

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Carol
Middle Name::
Family Name:: Thies
City of Residence:: San Rafael
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 342 Irwin Street
City of Mailing Address:: San Rafael
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94901

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number::

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An Appn claiming benefit under 35 USC 119(e) of	60/446,829	02/10/03
This Application	An Appn claiming benefit under 35 USC 119(e) of	60/512,326	10/17/03

Foreign Priority Information

Country::

Application number::

Filing Date::

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::